

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address):     TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	COURT USE ONLY
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE</b> <b>Riverside Historic:</b> 4050 Main Street, Riverside, CA 92501 <b>Riverside Family Law:</b> 4175 Main Street, Riverside, CA 92501 <b>Hemet:</b> 880 N State St., Hemet, CA 92543 <b>Palm Springs:</b> 3255 E. Tahquitz Canyon Way, Palm Springs, CA 92262	
CASE NAME:	CASE NUMBER:
<b>STIPULATION AND ORDER TO MEDIATION-PROBATE</b>	RETURN COURT DATE:

The parties hereby stipulate that the following matters in this case shall be submitted to Mediation:

All matters on calendar for the following date: \_\_\_\_\_

The following matters (specify title of pleading and filing date): \_\_\_\_\_

\_\_\_\_\_

Mediator's name and telephone number (if known): \_\_\_\_\_

Date of Mediation Session (if known): \_\_\_\_\_ OR Mediation to be completed by \_\_\_\_\_  
(date)

The following parties shall attend and participate in the Mediation session: \_\_\_\_\_

		Original Signatures	
_____		_____	
Type or print name of _____	Party without attorney	Attorney or Party without attorney	(Signature)
Attorney for _____			
_____		_____	
Type or print name of Party _____		Party	(Signature)
_____		_____	
Type or print name of _____	Party without attorney	Attorney or Party without attorney	(Signature)
Attorney for _____			
_____		_____	
Type or print name of Party _____		Party	(Signature)

IT IS SO ORDERED:

Date:

\_\_\_\_\_  
Judge of the Superior Court of Riverside County